MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application No.: 09980210

Applicant(s):

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			1			
2				1		
3				1		
4				1		
5				1		
6				1		
7				1		
8				1		
9				1		
10				1		
11			1			
12				8		
13			1			
14				1		
15				1		
16				1		
17				1		
18				1		
19				1		
20			1			
21			1			
22				1		
23				1		
24				1		
25				1		
26				1		
27				1		
28				1		
29				1		
30				1		
31			1			
32				1		
33				1		
34			1			
35			1			
36				1		
37				1		
38				1		
39				1		
40				5		
41			1			
42			1			
43			1			
44			1			
45				1		
46				1		
47				1		
48				1		
49				1		
50				1		
Total Indep						
Total Depend						
Total Claims						

		Indep	Depend	Indep	Depend	Indep
51			1			
52		1				
53			1			
54		1				
55			1			
56			1			
57			1			
58		1				
59		1				
60			1			
61			1			
62			1			
63			1			
64			1			
65			1			
66			1			
67			1			
68			1			
69			1			
70			1			
71			1			
72			1			
73		1				
74			1			
75			1			
76		1				
77			1			
78			1			
79		1				
80			1			
81			1			
82			1			
83			1			
84			1			
85			1			
86			1			
87			1			
88		1				
89			1			
90			1			
91			1			
92			1			
93			1			
94		1				
95		1				
96						
97						
98						
99						
100						
Total Indep	19					
Total Depend	87					
Total Claims	106					